

Clandestine Drug Lab Decontamination Contractor Certification Initial and Renewal Application Form



Renewal application must be received by the department one month before current certification expires.

Send the following:

- 1) Completed application form
- 2) Application fee* (see below for explanation)
- 3) Copy of **current** General Contractor Registration issued by Washington State Department of Labor and Industries
- 4) Copies of employees' **current** CDL certificates (Do not send Refresher Course Certificate)

Mail To:

Revenue Section

Clandestine Drug Lab Certification Program,

P.O. Box 1099 Olympia, WA 98507-1099

For overnight service, mail to:

101 Israel Rd SE Tumwater 98504-7901

Allow 30 days to process.

Business Name (As it appears on your WA State Dept of L&I contractor registration)		
Mailing Address		
City	State	Zip Code
Contact Person	Contractor Registration No.	Expiration Date
Telephone Number:	Account ID or UBI	
E-mail address:		
List cdl certified employees. Must have a minimum of two CDL certified decontamination employees of which one employee is a cdl certified supervisor. (Attach separate sheet if necessary)	Certification No.	Expiration Date
Signature		Date

*Application Fee (as of September 2, 2006):

CDL decontamination contractor certification expires annually on the expiration date of the applicant's L&I General Contractor Registration. Therefore, a CDL certification may be valid for less than one year. Calculate the fee at \$93.75 per month and count any partial month as an entire month for the purpose of calculating the fee. (For example: If your L&I Contractor Registration expires on September 12 and you apply for CDL Certification on April 23, the fee would be calculated at \$93.75 times six months = \$562.50.)

Application fee for an entire 12 months is \$1125

Make check payable to Washington State Department of Health (DOH). Fee is not refundable or transferable.

**CDL Decontamination Contractor Certification
Initial and Renewal Application Form**



Subscribed and sworn to before me this date:	<p>I hereby apply for a decontamination contractor certificate, as described in Washington Administrative Code (WAC) 246-205. I have read and understand, and agree to comply with all federal, state, and local regulations. I understand violation of these regulations could constitute grounds for suspension or revocation of this certificate.</p> <p>I hereby certify that the statements on this application are true and accurate to the best of my knowledge. [See Chapter 18.106 Revised Code of Washington (RCW) for False Statement or Material Misrepresentation.]</p>	
Notary Public:		
Residing at:		
My Commission Expires:		
Principal Owner's signature in ink		Date